PATENT APPLICA FEE DETERMINATION RECORD 19/520041												
CLAIMS AS FILED - PART I								IALL ENTI		OR	OTHER T	
			(Cotumn	1)	(Column 2)			RATE	FEE	f	RATE	FEE
u.s. national stage fees										^0	BASIC FEE	
BASIC FEE			SMALL ENT. =		LARGE ENT. = \$ 300			SICFEE			EXAM FEE	300
EXAMINATION FEE			Satisfies PCT Article 13(1)- (4) = \$50/\$100		\$ 100 / \$ 200		EX	M. FEE				as
SEARCH FEE			U.S. is ISA = \$ 50/\$ 100 ALL other countries = \$ 200/\$ 400		As other situations of \$ 250 / \$ 500		SEA	ARCH FEE			SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minus 100 =		/ 50 =		×	\$ 125 =			X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			/9 minu	ıs 20 =				(\$ 25 =		OR	X\$50=	
INDEPENDENT CLAIMS				nus 3 =			X	\$ 100 =		OR	X \$ 200 =	
MULTIPLE DEPENDENT CLAIM PRE			ESENT				1	\$ 180 =		OR	+ \$ 360 =	
* If the difference in column 1 is less than zero, enter "O" in column 2							,	TOTAL		OR	TOTAL	900
CLAIMS AS AMENDED - PART II (Column 2) (Column 3) (Column 3)								SMALL E	ADDI-	OR	OTHER SMALL E	
V V	7	CLAIMS REMAINING AFTER		PREVI	MBER HOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	· /G	Minus	•	20	- 6	[]	× \$ 25 =		OR	X\$50=	0
	Independent	. /	Minus		2	• /	×	(\$ 100 =		OR	X\$200 =	0
₹		ENTATION OF N	IULTIPLE DEPE	NOENT	CLAIM	E .	I L	\$ 180 =		OR	+\$ 360 =	
لب	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							PEE		OR	FEE	0
	5/18/06	(Cojumn 1) CLAMS REMARING AFTER		HOG HOUS PROEVI	ema 2) HEST MBER TOUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENT B		AMENDMENT			OFOR_			X \$ 25 =		OR	X\$ 60 =	
AMENDAI	Total	10	Matus		10 _		15	K \$ 100 =		OR	X\$ 200	
N.	Independent Minus					▍┝	• \$ 180 =		OR	+\$/360 =		
	FERST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 1	OTAL ADDIT.	 	OR	TOTAL ADOIT	A
* If the emby in column 1 is less than the entry in column 2, write "Y" in column 3. * If the Trighest Mumber Previously Paid For" IN THIS SPACE is less than "20", enter "20". ** If the Trighest Mumber Previously Paid For IN TRIS SPACE is less than "Y", enter "Y". ** If the Trighest Mumber Previously Paid For IN TRIS SPACE is less than "Y", enter "Y".												

Application or Docket Number